

# **HEALTH QUARTERLY STATEMENT**

AS OF JUNE 30, 2015 OF THE CONDITION AND AFFAIRS OF THE

## Anthem Health Plans of Maine, Inc.

NAIC Group Organized under the Laws of	O Code 0671 0671 (Current) (Prior) Maine		de <u>52618</u> Employer's  State of Domicile or Port of		
Country of Domicile		United States o			
Market Co. S. Carrier St. Market Co. S. Carrier St. Ca		54			
		Other			
Is HMO Federally Qualified? Yes [	] No [ X ]				
Incorporated/Organized	03/10/2000		Commenced Business _		06/05/2000
Statutory Home Office	2 Gannett Drive	,		uth Portland , ME, US C	
	(Street and Number)		A 1000 A 1000	r Town, State, Country	and Zip Gode)
Main Administrative Office		2 Gannett I (Street and N			
	nd , ME, US 04106-6911 State, Country and Zip Code)			866-583-6182 Area Code) (Telephone	
2					
Mail Address (S	2 Gannett Drive treet and Number or P.O. Box)			uth Portland , ME, US or Town, State, Country	
Primary Location of Books and Record	S	2 Gannett	Drive		
South Portlo	nd , ME, US 04106-6911	(Street and N		866-583-6182	
	state, Country and Zip Code)			Area Code) (Telephone	
Internet Website Address		www.anther	n.com		
Statutory Statement Contact	Dan Wolke			317-488-6	5245
	(Name)			hone Number)	
	olke@anthem.com -mail Address)	<del></del> , -		317-488-6010 (FAX Number)	
		OFFICE	RS		
President and Chairperson	Daniel Patrick Corcoran			Robert	David Kretschmer
Secretary	Kathleen Susan Kiefer		Assistant Secretary and Clerk	Lenda	I Libby Smith Esq.
AND AND THE PARTY OF THE PARTY		OTHE			
Timothy Paul Deno Valua	tion Actuary Eric (R	KT+03.11+26.14	Assistant Treasurer		
	D	IRECTORS OR	TRUSTEES		
Daniel Patrick Corce Wayne Scott DeVe	oran ydt	Carter Aller Bobert David K	n Beck Kretschmer	Kath	nleen Susan Kiefer In Edward Gallina
Catherine Irene Kela		Trobbit Barra 1			
Charles of	tele e				
	Maine SS:				
The officers of this reporting entity bein all of the herein described assets wer statement, together with related exhibit condition and affairs of the said reporting in accordance with the NAIC Annual Strules or regulations require difference respectively. Furthermore, the scope exact copy (except for formatting difference to the enclosed statement.	e the absolute property of the said s, schedules and explanations then g entity as of the reporting period s tatement Instructions and Account es in reporting not related to acc of this attestation by the described	reporting entity, frein contained, annestated above, and or ing Practices and Frounting practices officers also include	ee and clear from any liens exed or referred to, is a full a if its income and deductions rocedures manual except t and procedures, according es the related correspondin	s or claims thereon, ex and true statement of al therefrom for the perio o the extent that: (1) st to the best of their ing electronic filing with	cept as herein stated, and that this I the assets and liabilities and of the d ended, and have been completed ate law may differ; or, (2) that state nformation, knowledge and belief, the NAIC, when required, that is an
Daniel Patrick Corcoran	- 1 /	Kathleen Susa	n Kiefer	Ro	bert David Kretschmer
President		Secretar	у		Treasurer
Subscribed and sworn to before me this day of	August, 20 Berry	015	a. Is this an original filing     b. If no,     1. State the amendm     2. Date filed 3. Number of pages a	ent number	Yes [ X ] No [ ]

SHARON W. BERRY Notary Public, Maine My Commission Expires January 8, 2017

## **ASSETS**

				4	
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	205,745,304		205,745,304	200,748,393
	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)	9,439,050		9,439,050	8,573,920
	4.2 Properties held for the production of income (less				
	\$encumbrances)			0	0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$(36, 156, 696)), cash equivalents				
	(\$) and short-term				
	investments (\$	(35, 236, 591)		(35, 236, 591)	(40, 375, 054)
6.	Contract loans (including \$ premium notes)				0
7.	Derivatives			_	0
8.	Other invested assets				162.097
9.	Receivables for securities				1,031,416
10.	Securities lending reinvested collateral assets			9,140,622	
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)			189,240,481	
	Title plants less \$ charged off (for Title insurers	100,240,401		100,240,401	177,730,037
13.	only)			0	0
14.	Investment income due and accrued			2,237,816	
	Premiums and considerations:	2,207,010		2,207,010	2,232,040
15.	15.1 Uncollected premiums and agents' balances in the course of collection.	22 205 616	1 064 694	20, 420, 022	22 664 671
	15.2 Deferred premiums, agents' balances and installments booked but	22,000,010	1,304,004	20,420,302	20,004,071
	deferred and not yet due (including \$18,407,471  earned but unbilled premiums)	10 407 471		18,407,471	10 170 646
	15.3 Accrued retrospective premiums			732,098	
16		732,098		732,090	109,092
16.	Reinsurance:	6 004 560		6,994,560	4 750 649
	16.1 Amounts recoverable from reinsurers				
					0
47	16.3 Other amounts receivable under reinsurance contracts				
					1,292,742
	Current federal and foreign income tax recoverable and interest thereon			12,140,538	, ,
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	474		4/4	9,514
21.	Furniture and equipment, including health care delivery assets	000 005	000 000	0	0
	(\$)				0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0
23.	Receivables from parent, subsidiaries and affiliates			12,991,093	
24.	Health care (\$55,732,514 ) and other amounts receivable			55,732,514	
25.	Aggregate write-ins for other than invested assets	54,738,854	284,702	54,454,152	52,857,115
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	410,252,237	17,816,614	392,435,623	386,331,134
27	From Separate Accounts, Segregated Accounts and Protected Cell	,202,20.	,,,,,,,,,	302,100,020	355,551,151
21.	Accounts			0	0
28.	Total (Lines 26 and 27)	410,252,237	17,816,614	392,435,623	386,331,134
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Federal Employee Program Assets Held by Agent	47.122.571		47, 122, 571	
2502.	ACA Risk Adjustment Receivable			5,147,651	, ,
2502. 2503.	Premium Tax Recoverable			2,035,612	, ,
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page			148,318	
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	54,738,854	284,702	54,454,152	52,857,115

# LIABILITIES, CAPITAL AND SURPLUS

	<b></b>		Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1	Claims unpaid (less \$635,854 reinsurance ceded)		449,535		89,966,518
1. 2.	Accrued medical incentive pool and bonus amounts		449,333 .	, ,	2,441,957
3.	Unpaid claims adjustment expenses				2, 126, 370
4.	Aggregate health policy reserves, including the liability of			2, 147,207	2, 120,070
7.	\$ for medical loss ratio rebate per the Public				
	Health Service Act	70 664 517		70,664,517	94 328 224
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves				
8.	Premiums received in advance				13,223,751
9.	General expenses due or accrued				6, 172,827
10.1					
	(including \$ on realized gains (losses))	1,983,732		1,983,732	0
10.2	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				332,631
13.	Remittances and items not allocated				2,734,314
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$current)			0	0
15.	Amounts due to parent, subsidiaries and affiliates	18,209,901		18,209,901	6,303,439
16.	Derivatives			0	0
17.	Payable for securities				0
18.	Payable for securities lending	9,140,622		9,140,622	7,617,285
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22.	Liability for amounts held under uninsured plans	10,078,610		10,078,610	8,981,977
23.	Aggregate write-ins for other liabilities (including \$3,922,939				
	current)			11,422,529	
24.	Total liabilities (Lines 1 to 23)	241,147,578	449,535	241,597,113	245,114,594
25.	Aggregate write-ins for special surplus funds	XXX	XXX	9,215,329	18,002,175
26.	Common capital stock	XXX	XXX	2,500,000	2,500,000
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	120,652,900	120,652,900
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				
31.	Unassigned funds (surplus)	XXX	XXX	18,470,281	61,465
32.	Less treasury stock, at cost:				
	32.1 shares common (value included in Line 26				
	\$)	XXX	XXX		
	32.2 shares preferred (value included in Line 27				
	\$)				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX		141,216,540
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	392,435,623	386,331,134
	DETAILS OF WRITE-INS				
2301.	FEP Special Advance				6,234,119
2302.	Other Liabilities				1,898,260
2303.	Escheat Liability				1,268,299
2398.	Summary of remaining write-ins for Line 23 from overflow page				1,406,288
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)		0	11,422,529	10,806,966
2501.	Estimated ACA Insurer Fee		XXX		18,002,175
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	9,215,329	18,002,175
3001.					
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page				0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

## **STATEMENT OF REVENUE AND EXPENSES**

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1. M	lember Months		1,956,319	1,926,174	3,829,227
2. N	et premium income ( including \$ non-health				
	premium income)	XXX	494 , 177 , 294	495,218,083	1,009,056,404
3. C	hange in unearned premium reserves and reserve for rate credits	XXX	22,444,938	12,339,135	8,366,241
	ee-for-service (net of \$ medical expenses)				
5. Ri	isk revenue	XXX			
	ggregate write-ins for other health care related revenues			0	0
	ggregate write-ins for other non-health revenues			0	0
8. To	otal revenues (Lines 2 to 7)	XXX	516,622,232	507,557,218	1,017,422,645
	ospital and Medical:				
	lospital/medical benefits				
	other professional services		, , , , , , , , , , , , , , , , , , ,	4,235,173	
	outside referrals				
	mergency room and out-of-area		, , ,	15,448,583	
	rescription drugs			84,423,713	
	ggregate write-ins for other hospital and medical				0
	ncentive pool, withhold adjustments and bonus amounts				6,076,787 887,622,772
	ubtotal (Lines 9 to 15)	2,379,175	439, 193,233	443,923,022	001,022,112
	ess: let reinsurance recoveries		2.793.871	2,622,022	5 050 036
	otal hospital and medical (Lines 16 minus 17)				
	ona nospital and medical (Lines 16 minus 17)		430,399,302	441,303,000	
	Plaims adjustment expenses, including \$4,809,385 cost				
	containment expenses		9,164,005	13 255 966	25 002 895
	·		i i		82,569,667
	ncrease in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)		(1.218.769)	136 . 157	1.425.549
23. To	otal underwriting deductions (Lines 18 through 22)				990,761,047
	et underwriting gain or (loss) (Lines 8 minus 23)		19,256,410	3,735,220	26,661,598
25. N	et investment income earned		4,623,441	4,312,202	8,862,021
26. N	et realized capital gains (losses) less capital gains tax of				
	\$19,879		32,893	187,139	314,706
27. N	et investment gains (losses) (Lines 25 plus 26)	0	4,656,334	4,499,341	9, 176, 727
28. N	let gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$)				
	(amount charged off \$1,228 )]		(1,228)		(40)
29. A	ggregate write-ins for other income or expenses	0	12,832	24,276	34,678
30. N	let income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	vvv	23 024 348	8,258,837	35,872,963
	ederal and foreign income taxes incurred				16,721,008
	let income (loss) (Lines 30 minus 31)	XXX	11,452,571	1,119,400	19,151,955
	ETAILS OF WRITE-INS	7000	11,102,011	1,110,100	10, 101,000
	27/125 51 11/1/2 11/5	YYY			
0603.					
	ummary of remaining write-ins for Line 6 from overflow page			0	
	otals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	otals (Lines 0001 timough 0000 plus 0030)(Line 0 above)		-	0	
0702.					
0702.					
				0	
	ummary of remaining write-ins for Line 7 from overflow pageotals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
			-		0
1402					
1403					-
	ummary of remaining write-ins for Line 14 from overflow page			0	0
	otals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
	iscellaneous Income		12,832	24,276	34,678
2902					
	ummary of remaining write-ins for Line 29 from overflow page				0
2999. To	otals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	12,832	24,276	34,678

**STATEMENT OF REVENUE AND EXPENSES (Continued)** 

	STATEMENT OF REVENUE AND EX	PENSES (C	<i>-</i> onunuec	,
		Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	141,216,540	163, 128, 767	163,128,767
34.	Net income or (loss) from Line 32	11,452,571	1,119,400	19,151,955
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(6,501)	(24,784)	(28,343)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax	(2,084,377)	(889,500)	(1,267,654)
39.	Change in nonadmitted assets	260,277	(54,681)	3,231,815
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus.			
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			(43,000,000)
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	9,621,970	150,435	(21,912,227)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	150,838,510	163,279,202	141,216,540
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

## **CASH FLOW**

	CASH FLOW			
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	498,068,017	492,736,577	1,004,353,557
2.	Net investment income	5,717,532	5,369,406	10,979,658
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	503,785,549	498,105,983	1,015,333,215
5.	Benefit and loss related payments	447,569,202	440,767,490	
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	51,866,459	54,832,091	105,867,657
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$19,879 tax on capital gains (losses)	9,215,181	7,020,438	19,292,183
10.	Total (Lines 5 through 9)	508,650,842	502,620,019	1,003,337,633
11.	Net cash from operations (Line 4 minus Line 10)	(4,865,293)	(4,514,036)	11,995,582
11.	Net cash non operations (Line + minus Line 10)	(4,000,200)	(4,014,000)	11,330,302
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	18,269,010	25,641,315	53,363,059
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	1,031,416	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	19,300,426	25,641,315	53,363,059
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	24,065,419	30 , 102 , 406	59,550,768
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	1,092,170	285,161	921,594
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	1,523,337	615,600	8,648,701
	13.7 Total investments acquired (Lines 13.1 to 13.6)	26,680,926	31,003,167	69,121,063
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(7,380,500)	(5,361,852)	(15,758,004)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders		0	43,000,000
	16.6 Other cash provided (applied)	17,384,256	27,462,933	30,850,259
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	17,384,256	27,462,933	(12,149,741)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	F 400 400	47 507 045	/45 040 400
18.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,138,463	17,587,045	(15,912,163)
19.	Cash, cash equivalents and short-term investments:	(40.075.054)	(04, 400, 001)	(04, 400, 004)
	19.1 Beginning of year	(40,375,054)	(24,462,891)	(24,462,891)

Note: Supplemental disclosures of cash flow information for non-cash transactions:		

# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	I IXEIIIOI				<u> </u>	111011				
	1	1 Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	314,817	17,732	120,406	20 , 154	82,337	14,613	35,573	524	0	23,47
2. First Quarter	325,988	22,714	113,543	20,389	85,297	18,313	35,849	1,369	0	28,51
3. Second Quarter	326,877	22,583	112, 152	20,404	85,462	17,712	35,931	1,635		30,99
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	1,956,319	130,895	679,687	122,667	513,703	107,058	215,142	8,584		178,58
Total Member Ambulatory Encounters for Period:										
7 Physician	878,729	79,099	599,386	182,369				17,875		
8. Non-Physician	437,943	40,629	244,990	118,903				33,421		
9. Total	1,316,672	119,728	844,376	301,272	0	0	0	51,296	0	
10. Hospital Patient Days Incurred	42,648	3,454	24, 154	14,280				760		
11. Number of Inpatient Admissions	7,091	608	3,848	2,515				120		
12. Health Premiums Written (a)	494,516,340	48,940,276	319,598,006	22,118,921	2, 126, 859	3,227,093	89,777,350	6,095,808		2,632,02
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	516,961,278	48,905,649	339,741,685	21,697,370	2, 126,743	3,220,970	92,662,373	5,974,461		2,632,02
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	447,691,284	37,008,629	297,440,090	18,874,759	1,669,350	2,118,594	84,807,429	4,014,536		1,757,89
18. Amount Incurred for Provision of Health Care Services	439,193,233	37, 164, 779	287,738,561	19,275,304	1,705,729	2,184,536	83,997,507	4,870,764		2,256,05

# CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims											
1	2	3	4	5	6	7					
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total					
Claims Unpaid (Reported)			•								
0299999 Aggregate accounts not individually listed-uncovered	448,417	949	107		0	449,535					
0399999 Aggregate accounts not individually listed-covered	25,061,788		57,024		1,422,258	26,684,383					
0499999 Subtotals	25,510,205	88,895	57,131	55,429	1,422,258	27, 133, 918					
0599999 Unreported claims and other claim reserves			·			55,405,010					
0699999 Total amounts withheld						0					
0799999 Total claims unpaid						82,538,928					
0899999 Accrued medical incentive pool and bonus amounts						1,583,719					

## **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE											
	Claims		Liab		5	6					
	Year to		End of Curre	ent Quarter							
	1	2	3	4							
						Estimated Claim					
	On		On			Reserve and					
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability					
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of					
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year					
Comprehensive (hospital and medical)	56,970,764	283,625,548	4,715,753	50,588,050	61,686,517	64,477,752					
Comprehensive (hospital and medical)	50,970,704	203,023,340	4,715,755		01,060,317						
2. Medicare Supplement	3,778,952	15,095,807	208,669	5,777,600	3,987,621	5,585,744					
	, , , , , ,	, ,	,	. ,		, ,					
	440,000	4 000 000	00.000	047.005	470 000	000 004					
3. Dental Only	149,932	1,968,662	20,368	347,965	170,300	302,391					
4. Vision Only	144,782	1,524,568	1,827	157,217	146,609	122,665					
T. VISION ONLY	144,702	1,024,000	1,021	101,211	140,000	122,000					
5. Federal Employees Health Benefits Plan	16,009,660	68,214,468	491,434	17,432,127	16,501,094	18,674,532					
	145, 191	3.846.380	103.619	1 000 001	040 040	000 040					
6. Title XVIII - Medicare	145, 191	3,846,380	103,619	1,390,821	248,810	638,212					
7 Title XIX - Medicaid					0	0					
The factorial and the factoria											
8. Other health	647,201	1,110,696		741,713	647,201	243,557					
O Health substitution ( Associated as a constitution of the consti	77,846,482	375.386.129	5.541.670	76.435.493	83.388.152	90,044,853					
9. Health subtotal (Lines 1 to 8)		373,300,129	5,341,070			90,044,633					
10. Healthcare receivables (a)	1,332,830	9,786,522			1,332,830	0					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					<del>-</del>					
					_	_					
11. Other non-health		0			0	0					
12. Medical incentive pools and bonus amounts	962,597	2,249,434		1,583,719	962,597	2,441,957					
12. Medical incentive pools and bonus amounts				1,303,719	502,397	2,441,937					
13. Totals (Lines 9-10+11+12)	77,476,249	367,849,041	5,541,670	78,019,212	83,017,919	92,486,810					

<sup>(</sup>a) Excludes \$ ......54,990,523 loans or advances to providers not yet expensed.

For purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2014. This presentation addresses only significant events occurring since the last Annual Statement.

#### 1. Summary of Significant Accounting Policies

#### A. Accounting Practices

The accompanying financial statements of Anthem Health Plans of Maine, Inc. (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* ("NAIC SAP"), subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the "Bureau").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Bureau is shown below:

		State of Domicile	June 30, 2015	December 31, 2014
NET	<u>INCOME</u>			
(1)	Company state basis (Page 4, Line 32, Columns 2 & 4)	Maine	\$ 11,452,571	\$ 19,151,955
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:		-	_
(3)	State Permitted Practices that increase/(decrease) NAIC SAP:		-	-
(4)	NAIC SAP (1-2-3=4)	Maine	\$ 11,452,571	\$ 19,151,955
SUR	PLUS			
(5)	Company state basis (Page 3, Line 33, Columns 3 & 4)	Maine	\$ 150,838,510	\$ 141,216,540
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:		_	-
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:		-	-
(8)	NAIC SAP (5-6-7=8)	Maine	\$ 150,838,510	\$ 141,216,540

#### B. Use of Estimates in the Preparation of the Financial Statements

There were no significant changes for the six months ended June 30, 2015.

#### C. Accounting Policy

There were no significant changes for the six months ended June 30, 2015.

#### 2. Accounting Changes and Corrections of Errors

There were no significant changes for the six months ended June 30, 2015.

### 3. Business Combinations and Goodwill

There were no significant changes for the six months ended June 30, 2015.

### 4. Discontinued Operations

There were no significant changes for the six months ended June 30, 2015.

#### 5. Investments

#### A. - C.

There were no significant changes for the six months ended June 30, 2015.

#### D. Loan-Backed Securities

- (1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the six months ended June 30, 2015
- (3) The Company did not hold other-than-temporarily impaired loan-backed securities at June 30, 2015.

- (4) The Company had no impaired securities for which an other-than-temporary impairment had not been recognized in earnings as a realized loss at June 30, 2015.
- (5) The Company had no impaired loan-backed securities at June 30, 2015.

#### E. Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not enter into repurchase agreements at June 30, 2015.
- (2) There were no significant changes for the six months ended June 30, 2015.
- (3) Collateral received
  - a. There were no significant changes for the six months ended June 30, 2015.
  - The fair value of that collateral and of the portion of that collateral that it has sold or repledged

\$ 9,140,622

- c. There were no significant changes for the six months ended June 30, 2015.
- (4) Not applicable.
- (5) There were no significant changes for the six months ended June 30, 2015.
- (6) Not applicable.
- (7) Not applicable.

#### F. Real Estate

There were no significant changes for the six months ended June 30, 2015.

### G. Investments in Low-Income Housing Tax Credits

There were no significant changes for the six months ended June 30, 2015.

#### H. Restricted Assets

There were no significant changes for the six months ended June 30, 2015.

## I. Working Capital Finance Investments

There were no significant changes for the six months ended June 30, 2015.

#### J. Offsetting and Netting of Assets and Liabilities

There were no significant changes for the six months ended June 30, 2015.

#### K. Structured Notes

There were no significant changes for the six months ended June 30, 2015.

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

There were no significant changes for the six months ended June 30, 2015.

#### 7. Investment Income

There were no significant changes for the six months ended June 30, 2015.

#### 8. Derivative Instruments

There were no significant changes for the six months ended June 30, 2015.

#### 9. Income Taxes

There were no significant changes for the six months ended June 30, 2015.

#### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

#### A. - C.

There were no significant changes for the six months ended June 30, 2015.

#### D. Amounts Due from or to Related Parties

At June 30, 2015, the Company reported \$12,991,093 due from affiliates and \$18,209,901 due to affiliates, respectively. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreements.

#### E. - L.

There were no significant changes for the six months ended June 30, 2015.

#### 11. Debt

#### A. Debt, Including Capital Notes

The Company had no debt, including capital notes, outstanding at June 30, 2015.

#### B. FHLB (Federal Home Loan Bank) Arrangements

The Company had no FHLB agreements outstanding at June 30, 2015.

# 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

There were no significant changes for the six months ended June 30, 2015.

#### 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

There were no significant changes for the six months ended June 30, 2015.

### 14. Liabilities, Contingencies and Assessments

There were no significant changes for the six months ended June 30, 2015.

#### 15. Leases

There were no significant changes for the six months ended June 30, 2015.

#### 16. Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

There were no significant changes for the six months ended June 30, 2015.

### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

#### A. Transfers of Receivables Reported as Sales

Not applicable at June 30, 2015.

#### B. Transfer and Servicing of Financial Assets

- (1) There were no significant changes for the six months ended June 30, 2015.
- (2)-(7) Not applicable.

#### C. Wash Sales

- (1) There were no significant changes for the six months ended June 30, 2015.
- (2) Not applicable.

#### 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

#### A. Administrative Services Only Plans

There were no significant changes for the six months ended June 30, 2015.

#### B. Administrative Services Contract Plans

There were no significant changes for the six months ended June 30, 2015.

#### C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract

Not applicable at June 30, 2015.

#### 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

There were no significant changes for the six months ended June 30, 2015.

#### 20. Fair Value Measurements

- A. At June 30, 2015, the Company did not have any assets or liabilities measured at fair value.
- B. Not applicable.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	 acticable ng Value)
Bonds Short-term Investments	\$ 209,490,535	\$ 205,745,304	\$ 166,788	\$ 209,323,747	\$ -	\$ -
and Money Market Funds	920,105	920,105	920,105	-	-	-

D. Not Applicable.

#### 21. Other Items

There were no significant changes for the six months ended June 30, 2015.

#### 22. Events Subsequent

On July 24, 2015, the Company's ultimate parent company, Anthem, Inc. ("Anthem"), and Cigna Corporation ("Cigna") entered into an Agreement and Plan of Merger dated as of July 23, 2015, by and among Anthem, Cigna and Anthem Merger Sub Corp., a Delaware corporation and a direct wholly-owned subsidiary of Anthem, pursuant to which Anthem will acquire all outstanding shares of Cigna. The acquisition is expected to close in the second half of 2016 and is subject to certain state regulatory approvals, standard closing conditions, customary approvals required under the Hart-Scott-Rodino Antitrust Improvements Act and the approval of both the Anthem, Inc. shareholders and Cigna's stockholders.

There were no other events occurring subsequent to June 30, 2015 requiring disclosure. Subsequent events have been considered through August 13, 2015 for the statutory statement issued August 14, 2015.

## 23. Reinsurance

There were no significant changes for the six months ended June 30, 2015.

## 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

#### A. - D.

There were no significant changes for the six months ended June 30, 2015.

## E. Risk Sharing Provisions of the Affordable Care Act

(1)			g entity write accident and health insurance premium which is subject to the Act risk sharing provisions (YES/NO)?		Yes
(2)			Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Current Year		
	a.	Permanent Assets	ACA Risk Adjustment Program		
		1.	Premium adjustments receivable due to ACA Risk Adjustment	\$	5,147,651
		Liabilities			
		2.	Risk adjustment user fees payable for ACA Risk Adjustment	\$	18,422
		3.	Premium adjustments payable due to ACA Risk Adjustment	\$	617,989
		Operations	(Revenue & Expense)		
		4.	Reported as revenue in premium for accident and health		
			contracts (written/collected) due to ACA Risk Adjustment	\$	2,662,662
		5.	Reported in expenses as ACA risk adjustment user fees		
			(incurred/paid)	\$	8,979
	b.		I ACA Reinsurance Program		
		Assets	Americate recoverable for claims maid due to ACA Deineurones	φ	6 004 560
		1.	Amounts recoverable for claims paid due to ACA Reinsurance	\$	6,994,560
		2. 3.	Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	<u> </u>	635,854
		ა.	Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$	
		Liabilities	IOI AOA Neilisulalice	Ψ	<u> </u>
		4.	Liabilities for contributions payable due to ACA Reinsurance		
		٦.	- not reported as ceded premium	\$	4,801,808
		5.	Ceded reinsurance premiums payable due to ACA Reinsurance	\$	250,448
		6.	Liability for amounts held under uninsured plans contributions		200,110
		•	for ACA Reinsurance	\$	-
		Operations	(Revenue & Expense)		
		· 7.	Ceded reinsurance premiums due to ACA Reinsurance	\$	250,448
		8.	Reinsurance recoveries (income statement) due to ACA		· · · · · · · · · · · · · · · · · · ·
			Reinsurance payments or expected payments	\$	2,504,167
		9.	ACA Reinsurance contributions - not reported as ceded premium	\$	3,123,192
	C.	Temporary Assets	ACA Risk Corridors Program		
		1.	Accrued retrospective premium due to ACA Risk Corridors	\$	-
		Liabilities	' '		
		2.	Reserve for rate credits or policy experience rating refunds due		
			to ACA Risk Corridors	\$	-
		Operations	(Revenue & Expense)		
		3.	Effect of ACA Risk Corridors on net premium income		
			(paid/received)	\$	1,173,011
		4.	Effect of ACA Risk Corridors on change in reserves for rate		
			credits	\$	(1,173,012)

Line items where the amount is zero is due to no activity as of the reporting date.

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

										Differ	ence	9S			Ad	ljustments		Uns	settled Balances Da		ne Reporting
			ccrued During siness Written 31 of the	Befor	re December	Year on Bu	usiness V	of the Current Vritten Before e Prior Year	Ad	Prior Year ccrued Less Payments (Col 1 - 3)		Prior Year ccrued Less Payments (Col 2 - 4)		Prior Year Balances		o Prior Year Balances		Bala	Cumulative ance from Prior Years Col 1 - 3 + 7)	Ba P	umulative lance from rior Years ol 2 - 4 + 8)
			1		2	3		4		5		6		7		8			9		10
		R	eceivable		(Payable)	Receivabl	le	(Payable)	F	Receivable		(Payable)	R	eceivable		(Payable)	Ref		Receivable	(	Payable)
a.	Permanent ACA Risk Adjustment Program  1. Premium adjustments receivable	\$	2,716,000	\$	-	\$	- \$	-	\$	2,716,000	\$	-	\$	869,464	\$		Α	\$	3,585,464	\$	
	2. Premium adjustments (payable)	\$	-	\$	849,000	\$	- \$	-	\$	-	\$	849,000	\$	-	\$	(231,009)	В	\$	-	\$	617,991
	<ol> <li>Subtotal ACA Permanent Risk Adjustment Program</li> </ol>	\$	2,716,000	\$	849,000	\$	- \$	-	\$	2,716,000	\$	849,000	\$	869,464	\$	(231,009)		\$	3,585,464	\$	617,991
b.	Transitional ACA Reinsurance Program  1. Amounts recoverable for claims paid	\$	4,459,500	\$	_	\$	- \$	_	\$	4,459,500	\$	_	\$	996,858	\$	_	С	\$	5,456,358	\$	
	Amounts recoverable for claims unpaid (contra liability)	\$	666,748	•	_	\$	- \$	_	\$	666,748		_	\$	(666,745)	\$		D	\$	3	\$	
	Amounts receivable relating to	_Ψ	000,740	Ψ		Ψ	Ψ		Ψ	000,740	Ψ		Ψ	(000,140)	Ψ		D	_Ψ		Ψ	
	uninsured plans	\$	-	\$	-	\$	- \$	-	\$	-	\$	-	\$	-	\$	-	Е	\$	-	\$	-
	Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	\$	-	\$	1,678,616	\$	- \$	-	\$	-	\$	1,678,616	\$	-	\$	-	F	\$	-	\$	1,678,616
	Ceded reinsurance premiums 5. payable	\$	_	\$	_	\$	- \$	_	\$	_	\$	_	\$	_	\$	_	G	\$	_	\$	
	6 Liability for amounts held under uninsured plans	¢		¢		¢.	¢		\$		¢		¢ ·		¢.		ш	¢		¢	-
	7. Subtotal ACA Transitional	φ	-	φ	-	φ	- <b>p</b>	-	φ	-	φ	-	φ	-	φ	<del>-</del>	П	φ	-	φ	<del>-</del>
	Reinsurance Program	\$	5,126,248	\$	1,678,616	\$	- \$	-	\$	5,126,248	\$	1,678,616	\$	330,113	\$			\$	5,456,361	\$	1,678,616
C.	Temporary ACA Risk Corridors Program  1. Accrued retrospective premium	\$	546,769	\$	-	\$	- \$	-	\$	546,769	\$	-	\$	(546,769)	\$	-	I	\$	-	\$	
	Reserve for rate credits or policy experience rating refunds	\$	-	\$	-	\$	- \$	-	\$	-	\$	-	\$	-	\$		J	\$	-	\$	
Ч	Subtotal ACA Risk Corridors 3. Program Total for ACA Risk Sharing Provisions	\$	546,769 8,389,017	\$ \$	2,527,616	\$	- \$ - \$	<u>-</u>	\$	546,769 8,389,017	\$	2,527,616	\$ \$	(546,769) 652,808	\$	(231,009)		\$	9,041,825	\$	2,296,607
d.	Total IOI ACA KISK SHAIIIIY FIOVISIONS	Ψ	0,309,017	φ	2,321,010	ψ	- Þ	<u>-</u>	φ	0,303,017	φ	2,321,010	φ	002,000	φ	(231,009)		φ	3,041,023	φ	2,290,001

#### Evolunations of Adjustments

- A. Adjustments were made to reflect the ending balance as reported in the Centers for Medicare & Medicaid Services "Summary Report on Transitional Reinsurance Payments and Permanent Risk Adjustment Transfers for the 2014 Benefit Year".
- B. Adjustments we're made to reflect the ending balance as reported in the Centers for Medicare & Medicaid Services "Summary Report on Transitional Reinsurance Payments and Permanent Risk Adjustment Transfers for the 2014 Benefit Year".
- C. Adjustments were made to reflect the ending balance as reported in the Centers for Medicare & Medicaid Services "Summary Report on Transitional Reinsurance Payments and Permanent Risk Adjustment Transfers for the 2014 Benefit Year".
- D. Adjustments were made to reflect the ending balance as reported in the Centers for Medicare & Medicaid Services "Summary Report on Transitional Reinsurance Payments and Permanent Risk Adjustment Transfers for the 2014 Benefit Year".
- E. Not applicable.

- F. Not applicable.
- G. Not applicable.
- H. Not applicable.
- I. Adjustments are based upon experience to date, the impact, if any, of other risk-sharing programs and the provisions of the Risk Corridor program.
- J. Adjustments are based upon experience to date, the impact, if any, of other risk-sharing programs and the provisions of the Risk Corridor program.

#### 25. Change in Incurred Claims and Claims Adjustment Expenses

The estimated cost of claims and claim adjustment expense attributable to insured events of the prior years decreased by \$6,404,748 during 2015. This is approximately 7.1% of unpaid claims and unpaid claims adjustment expenses of \$90,360,440 as of December 31, 2014. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payments during the year, and as additional information is received regarding claims incurred prior to 2015. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claims adjustment expenses.

#### 26. Intercompany Pooling Arrangements

There were no significant changes for the six months ended June 30, 2015.

#### 27. Structured Settlements

There were no significant changes for the six months ended June 30, 2015.

#### 28. Health Care Receivables

There were no significant changes for the six months ended June 30, 2015.

#### 29. Participating Policies

There were no significant changes for the six months ended June 30, 2015.

#### 30. Premium Deficiency Reserves

At June 30, 2015 the Company recorded premium deficiency reserves of \$ 206,780 related to the Medicare Advantage line of business.

٠,	Liability carried for premium deficiency reserves Date of the most recent evaluation of this liability	\$	206,780 06/30/2015	_
(3)	Was anticipated investment income utilized in the calculation?	Yes	s No	Χ

#### 31. Anticipated Salvage and Subrogation

There were no significant changes for the six months ended June 30, 2015.

## **GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

## **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring to Domicile, as required by the Model Act?	the filing of Disc	closure of Material Trans	sactions wit	h the Sta	ite of		Yes [	]	No [	Х]
1.2	If yes, has the report been filed with the domiciliary state?							Yes [	]	No [	]
2.1	Has any change been made during the year of this statement in the chareporting entity?							Yes [	]	No [	Х]
2.2	If yes, date of change:						<u>-</u>				
3.1	Is the reporting entity a member of an Insurance Holding Company Sys is an insurer?							Yes [ X	( ]	No [	]
3.2	Have there been any substantial changes in the organizational chart single		uarter end?					Yes [	]	No [	X ]
3.3	If the response to 3.2 is yes, provide a brief description of those change	es.									
4.1	Has the reporting entity been a party to a merger or consolidation during	ng the period c	overed by this statemen	t?				Yes [	]	No [	Х ]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use	e two letter state abbrev	iation) for a	ny entity	that has	i				
	1 Name of Entity		2 NAIC Company Code	State of	3 Dominila						
	Name of Entity		NAIC Company Code	State of	DOMICIE						
5.	If the reporting entity is subject to a management agreement, including in-fact, or similar agreement, have there been any significant changes If yes, attach an explanation.						Yes [	] No [	[ X	] N/A	A [ ]
6.1	State as of what date the latest financial examination of the reporting e	entity was made	or is being made				<u>-</u>	12,	/31/	2013	
6.2	State the as of date that the latest financial examination report became date should be the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the date of the examined balance sheet and not the examined ba							12,	/31/	2013	
6.3	State as of what date the latest financial examination report became at the reporting entity. This is the release date or completion date of the date).	examination re	port and not the date of	the examin	ation (ba	lance sl	neet	06,	/29/	2015	
6.4 6.5	By what department or departments? State of Maine Bureau of Insurance Have all financial statement adjustments within the latest financial exar statement filed with Departments?						Yes [	] No [	[	] N/A	1 [ X ]
6.6	Have all of the recommendations within the latest financial examination	n report been c	omplied with?				Yes [	] No [	[	] N/A	\ [ X ]
7.1	Has this reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?							Yes [	]	No [	Х]
7.2	If yes, give full information:										
8.1	Is the company a subsidiary of a bank holding company regulated by the	he Federal Res	erve Board?					Yes [	]	No [	Х]
8.2	If response to 8.1 is yes, please identify the name of the bank holding of	company.									
8.3	Is the company affiliated with one or more banks, thrifts or securities fir	rms?						Yes [	]	No [	Х]
8.4	If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commiss	e Office of the O	Comptroller of the Curre	ncy (OCC),	the Fede	eral Dep					
	1 Affiliate Name	1	2 ocation (City, State)		3 FRB	4 OCC	5 FDIC	6 SEC	1		
	Alliliate Natific	<u>L</u>	ocation (Oity, State)		1110	000	1 010	JLU	1		

## **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  (c) Compliance with applicable governmental laws, rules and regulations;  (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  (e) Accountability for adherence to the code.	Yes [ X ] No [ ]
9.11	If the response to 9.1 is No, please explain:	
9.2 9.21	Has the code of ethics for senior managers been amended?  If the response to 9.2 is Yes, provide information related to amendment(s).	Yes [ X ] No [ ]
9.3	Minor revisions were made in February 2015. Specifically, the language was modified for the following policy changes contained within the code: Community Service, Business Entertainment, Vendor Relationships, Prohibition on Discrimination in Marketing and Enrollment, and Business Relationships with Pharmaceutical Manufacturers. Additionally the Chief Executive Officer's letter was updated, a letter from the Chief Compliance Officer was added and certain informational sections were removed.  Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [ ] No [ X ]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).	ies [ ] NO [ X ]
	FINANCIAL	
	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?  If yes, indicate any amounts receivable from parent included in the Page 2 amount:  \$\_\\$	
	INVESTMENT	
	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)	Yes [ ] No [ X ]
12. 13.	Amount of real estate and mortgages held in other invested assets in Schedule BA:  Amount of real estate and mortgages held in short-term investments:	
14.1 14.2		
	Prior Year-End Book/Adjusted	Current Quarter Book/Adjusted Carrying Value
14.21	Bonds	\$0
	Preferred Stock \$ 0	\$0
	Common Stock \$0	\$0
	Short-Term Investments \$ 0	\$0
14.25	Mortgage Loans on Real Estate	\$0
14.26	All Other	\$0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)\$0	\$0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above0	\$0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?	Yes [ ] No [ X ]
	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?	

## **GENERAL INTERROGATORIES**

16.	For the reporting entity's security le	ending program, state the amount of the	e following as	s of the current state	ment date:		
	16.1 Total fair valu	e of reinvested collateral assets report	ted on Sched	ule DL, Parts 1 and	2	\$	9,140,62
	16.2 Total book ac	ljusted/carrying value of reinvested col	lateral assets	reported on Sched	ıle DL, Parts 1 and 2	\$	9,140,62
	16.3 Total payable	for securities lending reported on the	liability page.			\$	9, 140, 62
17. 17.1	offices, vaults or safety deposit be custodial agreement with a qualific Outsourcing of Critical Functions,	ort 3 - Special Deposits, real estate, mo oxes, were all stocks, bonds and other ed bank or trust company in accordan Custodial or Safekeeping Agreements on the requirements of the NAIC Financ	securities, ov ce with Sections of the NAIC	vned throughout the on 1, III - General Ex Financial Condition	current year held pursuant to a amination Considerations, F. Examiners Handbook?		s[X] No[]
	Name of	1 Custodian(s)		Cup	2 rodian Address		]
	Bank of New York Mellon Corporat	ion	New York, N	\Y	odian Address		1
			,				
17.2	For all agreements that do not comlocation and a complete explanati	ply with the requirements of the NAIC on:	Financial Co	ndition Examiners H	andbook, provide the name,		
	1	2			3		1
	Name(s)	Location(s)		Com	plete Explanation(s)		-
17.3 17.4	Have there been any changes, incl If yes, give full information relating	uding name changes, in the custodiand thereto:	(s) identified	in 17.1 during the cu	rrent quarter?	Yes	[ ] No [ X ]
	1	2		3	_ 4		1
	Old Custodian	New Custodian	Dat	e of Change	Reason		-
17.5		okers/dealers or individuals acting on b ity to make investments on behalf of th			access to the investment accou	ınts,	J
	1 Central Registration Depository	2 Name(s)			3 Address		
	106482	Dimensional Fund Advisors		Santa Monica. CA	Address		
	113878	McDonnell Investment Management, LL					
							]
18.1	Have all the filing requirements of t If no, list exceptions:	he Purposes and Procedures Manual	of the NAIC S	Securities Valuation	Office been followed?	Ye	s[X] No[]
10.2	ii iio, iist exceptioris.						

## **GENERAL INTERROGATORIES**

## PART 2 - HEALTH

#### Operating Percentages:

	1.1 A&H loss percent	 		85.4	
	1.2 A&H cost containment percent	 		0.9	
	1.3 A&H expense percent excluding cost containment expenses	 		11.1 '	0
2.1	Do you act as a custodian for health savings accounts?	 Yes [	] No [ X	]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$ 		0	
2.3	Do you act as an administrator for health savings accounts?	 Yes [	] No [ X	]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date	\$		0	

# STATEMENT AS OF JUNE 30, 2015 OF THE Anthem Health Plans of Maine, Inc. SCHEDULE S - CEDED REINSURANCE Showing All New Reinsurance Treaties - Current Year to Date

		Snowing All New Reinsura	nce Treaties	- Current Yea	ar to Date		
1 NAIC	2	Showing All New Reinsura  3 4		6 Type of Reinsurance Ceded		8 Certified Reinsurer	9 Effective Date of Certified
Company Code	ID	Effective	Domiciliary	Reinsurance		Rating	Reinsurer
Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Rating
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## **SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

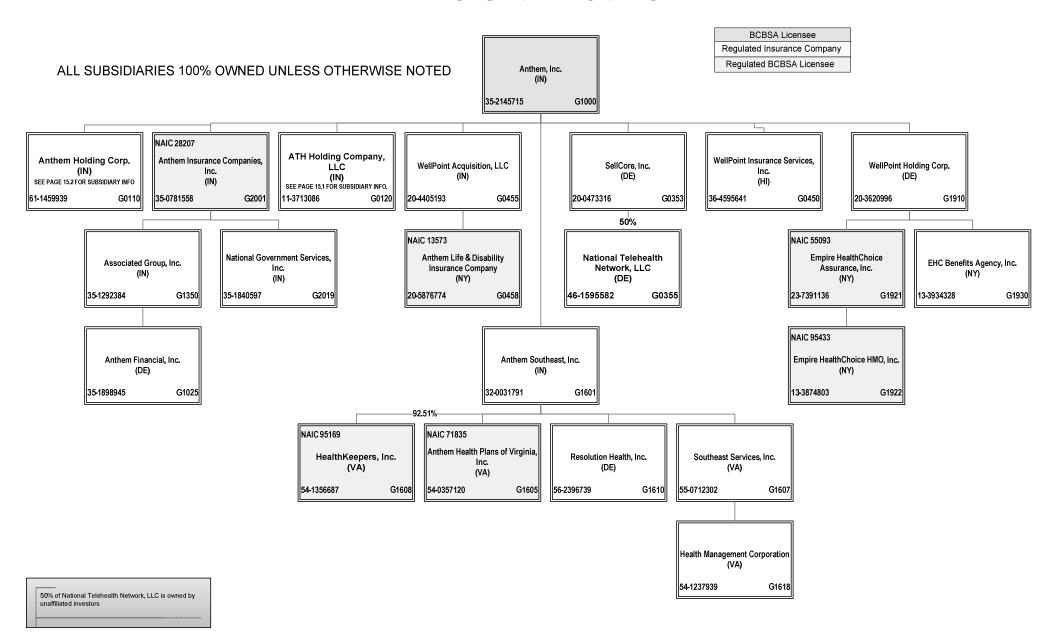
Current Year to Date - Allocated by States and Territories

			Current Ye	ear to Date - A	llocated by S					
		1	2	3	4	Direct Bus	siness Only 6	7	8	9
		Active	Accident and Health	Medicare	Medicaid	Federal Employees Health Benefits Program	Life and Annuity Premiums & Other	Property/ Casualty	Total Columns 2	Deposit-Type
	States, etc.	Status	Premiums	Title XVIII	Title XIX	Premiums	Considerations	Premiums	Through 7	Contracts
1.	Alabama AL	N							0	
2.	Alaska AK	N							0	
3.	Arizona AZ	N							0	
4.	Arkansas AR	N							0	
	California CA	N							0	
6.	ColoradoCO	N							0	
7. o	Connecticut CT	N							0	
8. 9.	Delaware DE District of Columbia DC	N N							0	
-	Florida FL	NN							0	
11.	Georgia GA	N							0	
	Hawaii HI	N							0	
13.	Idaho ID	N							0	
14.	Illinois IL	N							0	
15.	Indiana IN	N							0	
16.	lowa IA	N							0	ļ
17.	Kansas KS	N		<b></b>			ļ		0	
	Kentucky KY	N							0	
	Louisiana LA	N		0.005.000		00 777 077			0	
20.	Manuand ME	L	398,643,182	6,095,808		89,777,350			494,516,340	
	Maryland MD Massachusetts MA	NN	-						0	
	Michigan MI	NN.	†				· · · · · · · · · · · · · · · · · · ·		0	
23. 24.	Minnesota MN	NN	†	·			ļ		0	<b> </b>
	Mississippi MS	NN	I						0	
26.	Missouri MO	N							0	
27.	Montana MT	N.							0	
28.	Nebraska NE	N							0	
	Nevada NV	N							0	
	New Hampshire NH	N							0	
	New Jersey NJ	N							0	
32.	New Mexico NM	N							0	
33.	New York NY North Carolina NC	N							0	
34. 35.	North Dakota ND	N N							0	
36.	Ohio OH	NN							0	
37.	Oklahoma OK	NN							0	
38.	Oregon OR	N							0	
	Pennsylvania PA	N							0	
	Rhode Island RI	N							0	
41.	South Carolina SC	N							0	
42.	South Dakota SD	N							0	
43.	Tennessee TN	N							0	
44.	Texas TX	N							0	
45.	Utah UT	N							0	
	Vermont VT	NN.	+						0	
47. 48.	Virginia VA Washington WA	A1	-	l			·		0	
46. 49.	West Virginia WV	NI.							0	<b></b>
	Wisconsin WI	NN.	1						n	
	Wyoming WY	N							0	
52.	American Samoa AS	N							0	
53.	Guam GU	N							0	
	Puerto Rico PR	N							0	
	U.S. Virgin Islands VI	N					ļ		0	ļ
56.	Northern Mariana Islands MP	N							n	
57.	Canada CAN								0	
58.	Aggregate Other									
	Aliens OT	XXX	0	0	0	0	0	0	0	0
59.	Subtotal	XXX	398,643,182	6,095,808	0	89,777,350	0	0	494,516,340	0
60.	Reporting Entity Contributions for Employ Benefit Plans								0	
61.	Totals (Direct Business)	(a) 1	398,643,182	6,095,808	0	89,777,350	0	0	494,516,340	0
	DETAILS OF WRITE-INS									
58001.							<del> </del>			<del> </del>
58002.										
58003.		XXX					<del> </del>			
od998.	Summary of remaining write-ins for Line 58 from									
	overflow page	XXX	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through									
	58003 plus 58998)(Line 5		0	0	0	0	0	0		ĺ
	above)	XXX				11		0	0	0

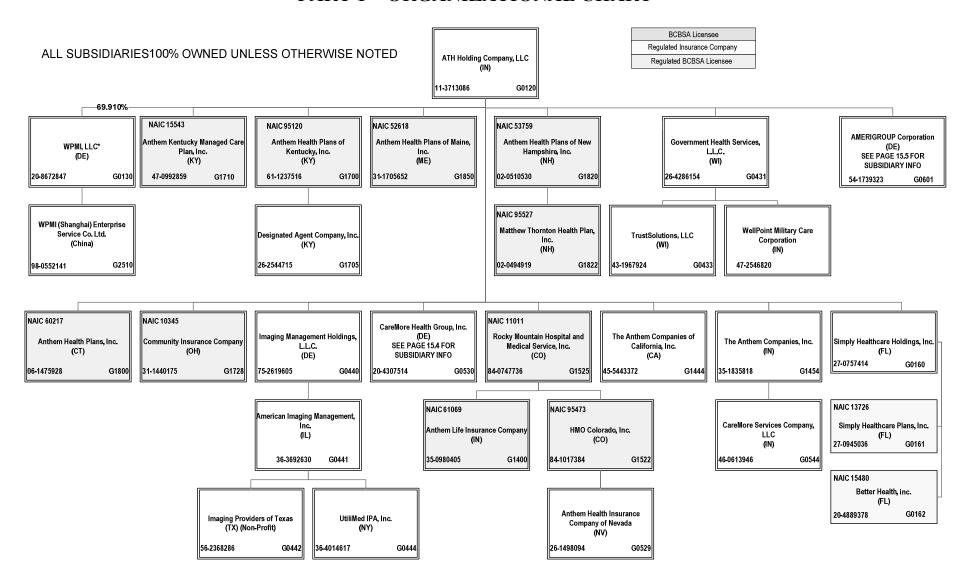
<sup>(</sup>L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

<sup>(</sup>a) Insert the number of L responses except for Canada and Other Alien.

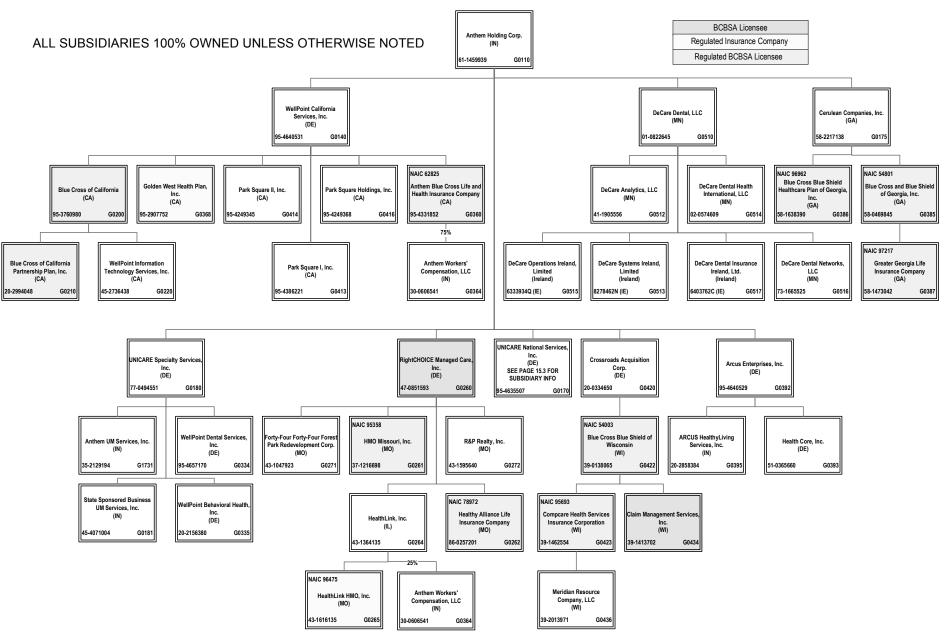
# SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



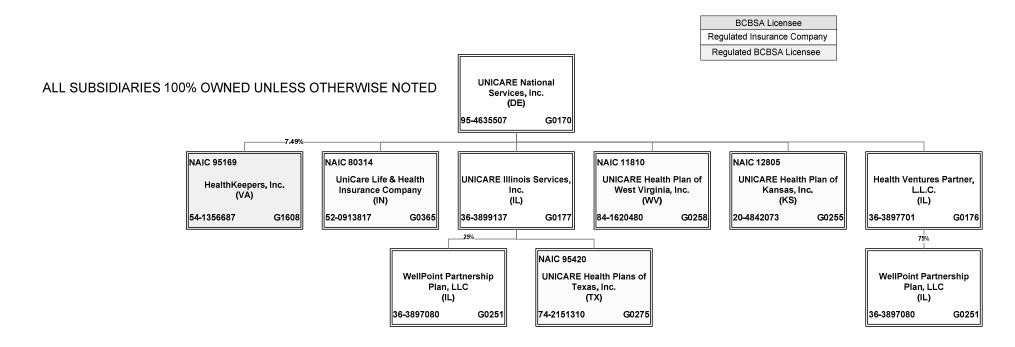
# SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

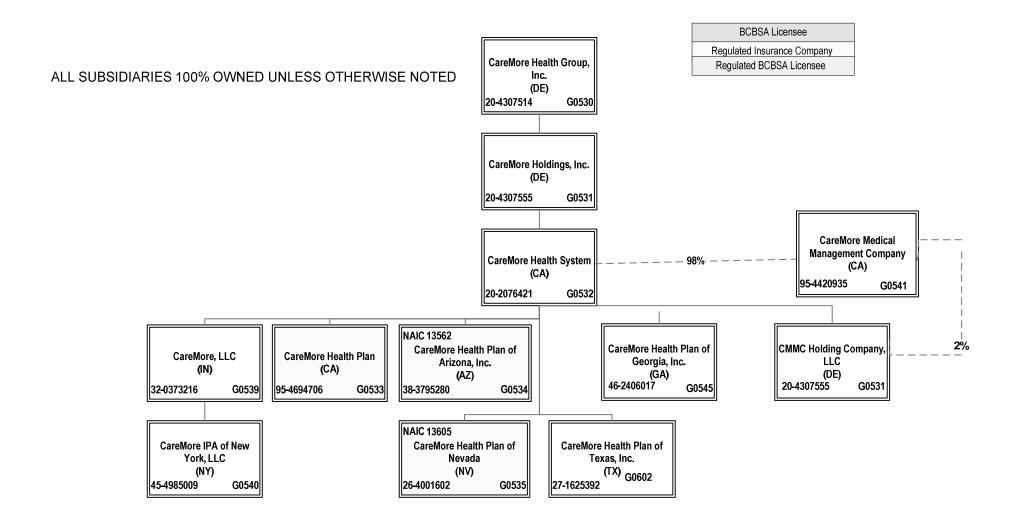


5.2



# SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

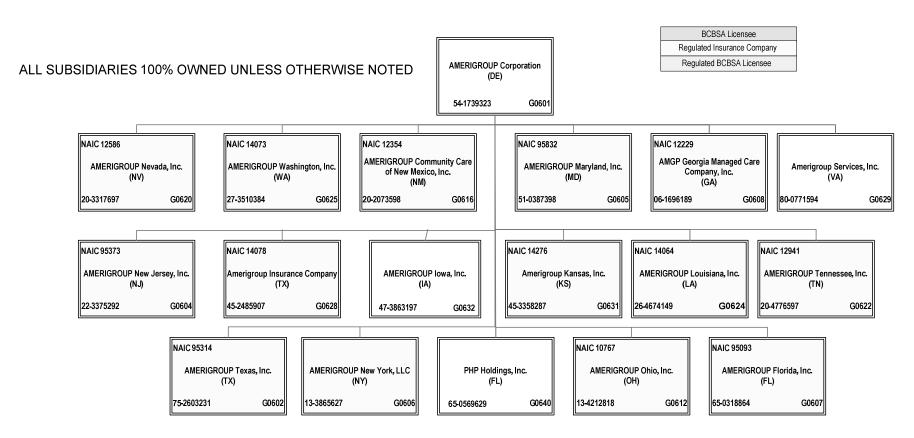




15.5

#### STATEMENT AS OF JUNE 30, 2015 OF THE Anthem Health Plans of Maine, Inc.

## SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



# SCHEDULE Y

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				PAI	₹1 1 <i>F</i>	4 - DE I AIL	. OF INSURANCE	: п	ノレレル	NG COIVIPANT 3	O I O I E IVI			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	_		-				_	_			Type	If		
											of Control	Control		
											(Ownership,	is		
						Name of Securities			Relation-		Board,	Owner-		
						Exchange		Domi-	ship		Management,	ship		
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		
Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	*
0671	Anthem, Inc.		36-3692630				American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C	Ownership	100.000	Anthem, Inc.	
							AMERIGROUP Community Care of New Mexico,							
0671	Anthem, Inc.	12354	. 20-2073598 .				Inc	NM	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		54-1739323				AMERIGROUP Corporation	DE		ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95093	. 65-0318864 .				AMERIGROUP Florida, Inc.	FL	IA	PHP Holdings, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14078	. 45-2485907 .				Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		47-3863197				AMERIGROUP Iowa, Inc.	IA	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
<u>0</u> 671	Anthem, Inc.		45-3358287				Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14064	26-4674149				AMERIGROUP Louisiana, Inc.	LA	I A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95832	51-0387398				AMERIGROUP Maryland, Inc.	MD	I A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc	
0671	Anthem, Inc.	12586	20-3317697				AMERIGROUP Nevada, Inc.	NV	I A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc	
0671	Anthem, Inc.	95373	. 22-3375292 .				AMERIGROUP New Jersey, Inc	NJ		AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 13-3865627 .				AMERIGROUP New York, LLC	NY	IA	AMERIGROUP Corporation	Ownership		Anthem, Inc.	0100
0671	Anthem, Inc.		13-4212818				AMERIGROUP Ohio, Inc.	OH	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		80-0771594				Amerigroup Services, Inc.	VA	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-4776597				AMERIGROUP Tennessee, Inc.	TN	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95314	75-2603231				AMERIGROUP Texas, Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		27-3510384				AMERIGROUP Washington, Inc	WA		AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc	
0671	Anthem, Inc.	12229	. 06-1696189 .				AMGP Georgia Managed Care Company, Inc	GA	I A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
							Anthem Blue Cross Life and Health							
0671	Anthem, Inc.	62825	95-4331852				Insurance Company	CA		WellPoint California Services, Inc	Ownership		Anthem, Inc.	
0671	Anthem, Inc.		. 35-1898945 .				Anthem Financial, Inc.	DE		Associated Group, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 26-1498094				Anthem Health Insurance Company of Nevada	NV		HMO Colorado, Inc.	Ownership	100.000	Anthem, Inc.	
<u>0</u> 671 0671	Anthem, Inc.	95120 52618	61-1237516				Anthem Health Plans of Kentucky, Inc.	KY ME		ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
00/1	Anthem, Inc.	32018	31-1705652				Anthem Health Plans of Maine, Inc	ME	HE	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0074	Anthem. Inc.	53759	00 0510500				Anthem Health Plans of New Hampshire, Inc.	NII I	1.4	ATIL Haldian Common. 11 C	Ownership		Anthem. Inc.	
0671	Anthem Inc	71835	. 02-0510530 . . 54-0357120 .	40003317			Anthem Health Plans of Virginia, Inc	NH		ATH Holding Company, LLCAnthem Southeast, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		. 06-1475928 .	40003317			Anthem Health Plans, Inc.	CT		ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
	Anthem. Inc.	00217	61-1459939				Anthem Holding Corp.	IN		Anthem. Inc.	Ownership	100.000	Anthem, Inc.	
007 1	Anthem, mc.		. 01-1409909			New York Stock Exchange	Anthem nording corp.	111		Anthell, mc.	Owner strip		Anthem, mc.	
0671	Anthem, Inc.		35-2145715		6324	(NYSE)	Anthem, Inc.	IN	UIP				Anthem, Inc.	
0671	Anthem. Inc.		35-0781558		. 0024	_ (NIOL)	Anthem Insurance Companies, Inc.	IN	IA	Anthem. Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem. Inc.		47-0992859				Anthem Kentucky Managed Care Plan, Inc.	KY		ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	
1 100	Airtheil, mc.		. 47 0332033 .				Anthem Life & Disability Insurance Company	!\\ 1		ATTITIOTATING COMPANY, LLC	Owner strip		Antilelli, Ilic.	
0671	Anthem, Inc.	13573	. 20-5876774 .				Anthem Erre a broadfirty modrance company	NY	IA	WellPoint Acquisition, LLC	Ownership	100.000	Anthem, Inc.	
007 1	Arthon, mo.		20 00/0//4 .							Rocky Mountain Hospital and Medical	owner strip		Anthon, mo.	
0671	Anthem, Inc.	61069	35-0980405				Anthem Life Insurance Company	IN	IA	Service, Inc.	Ownership		Anthem. Inc.	
0671	Anthem. Inc.		32-0031791				Anthem Southeast, Inc.	IN	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		35-2129194				Anthem UM Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem. Inc.	
	,									Anthem Blue Cross Life and Health			, , , , , , , , , , , , , , , , , , , ,	
0671	Anthem, Inc.		30-0606541				Anthem Workers' Compensation, LLC	IN	NIANIA	Insurance Company	Ownership	75.000	Anthem, Inc.	
0671	Anthem, Inc.		30-0606541				Anthem Workers' Compensation, LLC	IN	NIA	HealthLink, Inc.	Ownership	25.000	Anthem, Inc.	
0671	Anthem, Inc.		95-4640529		.		Arcus Enterprises, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-2858384				ARCUS HealthLiving Services, Inc.	IN	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35-1292384				Associated Group, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		11-3713086				ATH Holding Company, LLC	IN		Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	15480	20-4889378 .				Better Health, Inc.	FL	IA	Simply Healthcare Holdings, Inc.	Ownership	100.000	Anthem, Inc.	
1							Blue Cross and Blue Shield of Georgia,			-				
0671	Anthem, Inc.	54801	58-0469845	.l	.	.	Inc.	GA	I.A.	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	

## **SCHEDULE Y**

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				FAR	I IA-DEIAI	L OF INSURANCE	: п	ノレレニ	NG COMPANT 3	I S I E IVI			
1	2	3	4	5	6 7	8	9	10	11	12	13	14	15
										Type	If		
										of Control	Control		
										(Ownership,	is		
					Name of Securities	;		Relation-		Board,	Owner-		
					Exchange		Domi-	ship		Management.	ship		
		NAIC			if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		
Group		Company	ID	Federal	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	
Code	Group Name	Code	Number	RSSD	CIK International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	*
0000	3.54p . ta5	0000		1.002	ent internationally	Blue Cross Blue Shield Healthcare Plan of		y	(rtaine or zinatyri ordan)	0	iago .		
0671	Anthem, Inc.	96962	58-1638390 .			Georgia, Inc.	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem. Inc.	54003	39-0138065			Blue Cross Blue Shield of Wisconsin	WI	IA	Crossroads Acquisition Corp.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.	01000	95-3760980			Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	0101
	, , , , , , , , , , , , , , , , , , , ,					Blue Cross of California Partnership Plan.							
0671	Anthem. Inc.		20-2994048			Inc.	CA	IA	Blue Cross of California	Ownership	100,000	Anthem. Inc.	0102
0671	Anthem. Inc.		20-4307514			CareMore Health Group, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		95-4694706			CareMore Health Plan	CA	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	0103
0671	Anthem. Inc.	13562	38-3795280			- CareMore Health Plan of Arizona, Inc.	AZ	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		46-2406017			CareMore Health Plan of Georgia, Inc	GA	NIA	CareMore Health System	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.	13605	26-4001602			CareMore Health Plan of Nevada	NV	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		27-1625392			- CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Health System	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		20-4307555			CareMore Holdings, Inc.	DE	NIA	CareMore Health Group, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		45-4985009			CareMore IPA of New York, LLC	NY	NIA	CareMore. LLC	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		32-0373216			CareMore, LLC	IN	NIA	CareMore Health System	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		20-2076421			CareMore Health System	CA	NIA	CareMore Holdings. Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		95-4420935			CareMore Medical Management Company	CA	NIA	CareMore Health System	Ownership	98.000	Anthem. Inc.	
0671	Anthem. Inc.		95-4420935			- CareMore Medical Management Company	CA	NIA.	CMMC Holding Company, LLC	Ownership	2.000	Anthem, Inc.	
0671	Anthem, Inc.		46-0613946			- CareMore Services Company, LLC	IN	NIA	The Anthem Companies, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		58-2217138			Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		39-1413702			Claim Management Services, Inc.	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		20-4307555			CMMC Holding Company, LLC	DE	NIA	CareMore Health System	Ownership	.100.000	Anthem. Inc.	
0671	Anthem. Inc.	10345	31-1440175			Community Insurance Company	OH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	
	741 (110m, 1110.		. 01 1110170 .			Compcare Health Services Insurance			. Attributing company, ELO	- Carrot Girip		7411110111, 1110.	
0671	Anthem. Inc.	95693	39-1462554			Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		20-0334650			Crossroads Acquisition Corp.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		41-1905556			DeCare Analytics, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		02-0574609			DeCare Dental Health International, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		02 001 1000 .			DeCare Dental Insurance Ireland, Ltd.	JRL	NIA	DeCare Dental, LLC	Ownership	.100.000	Anthem, Inc.	
0671	Anthem. Inc.		73-1665525			DeCare Dental Networks, LLC	MN	NIA	DeCare Dental, LLC	Ownership	.100.000	Anthem. Inc.	
0671	Anthem. Inc.		01-0822645			DeCare Dental. LLC	MN	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		01 0022010 :			DeCare Operations Ireland, Limited	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.					DeCare Systems Ireland, Limited	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem. Inc.		26-2544715			Designated Agent Company. Inc.	KY	NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		13-3934328			EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.	55093	23-7391136 .			Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.	95433	13-3874803			Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Anthem. Inc.	
			.0 007 1000 .			Forty-Four Forty-Four Forest Park	1		The state of the s				
0671	Anthem, Inc.		43-1047923			Redevelopment Corp.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem. Inc.		95-2907752			Golden West Health Plan, Inc.	CA	IA	WellPoint California Services. Inc.	Ownership	100.000	Anthem. Inc.	0104
0671	Anthem, Inc.		26-4286154			Government Health Services, LLC		NIA	ATH Holding Company, LLC	Ownership	.100.000	Anthem. Inc.	
	,								Blue Cross and Blue Shield of Georgia,	· · · · · · · · · · · · · · ·			
0671	Anthem. Inc.	97217	58-1473042			Greater Georgia Life Insurance Company	GA	IA	Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		51-0365660			Health Core, Inc.	DE	NIA	Arcus Enterprises. Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem. Inc.		54-1237939			- Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		36-3897701			Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.	95169	54-1356687			HealthKeepers. Inc.	VA	IA	Anthem Southeast. Inc.	Ownership	92.510	Anthem. Inc.	
0671	Anthem, Inc.		54-1356687			HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem. Inc.	
0671	Anthem, Inc.	96475	43-1616135			HealthLink HMO. Inc.	WO	IA	HealthLink. Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		43-1364135			HealthLink, Inc.	IL	NIA	RightCH0ICE Managed Care, Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.	78972	86-0257201			Healthy Alliance Life Insurance Company	MO		RightCHOICE Managed Care, Inc.	Ownership		Anthem. Inc.	
ו וטע	nittion, 110	10012	00 0201201.			Incarting Arriance Line insurance company	IVIU	I <b>/</b>	. Introductor managed bate, The	-   O III I I I I I I I I I I I I I I I I		//III.	

## **SCHEDULE Y**

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				PAF	KI 1A	A - DE I AIL	. OF INSURANCI	= H(	ノレレ	ING COMPANY S	OYO I EIVI			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
											Type	If		1
											of Control	Control		
											(Ownership,	is		
						Name of Securities			Relation	-	Board,	Owner-		
						Exchange		Domi-	ship		Management,	ship		
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reportin		Influence,	Percen-	Ultimate Controlling	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity		Other)	tage	Entity(ies)/Person(s)	*
										Rocky Mountain Hospital and Medical				
0671	Anthem, Inc.	95473	. 84-1017384				HMO Colorado, Inc.	CO	IA	Service, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 37-1216698 .				HMO Missouri, Inc.	MO	I A	RightCHOICE Managed Care, Inc	Ownership		Anthem, Inc.	
0671	Anthem, Inc.		. 75-2619605 .				Imaging Management Holdings, L.L.C.	DE	NI A	ATH Holding Company, LLC	Ownership		Anthem, Inc.	
0671	Anthem, Inc.		. 56-2368286 .				Imaging Providers of Texas (non-profit)	TX	NIA	American Imaging Management, Inc	Ownership	100.000	Anthem, Inc.	
										Anthem Health Plans of New Hampshire,				
0671	Anthem, Inc.	95527	02-0494919				Matthew Thornton Health Plan, Inc.	NH	IA	Inc	Ownership	100.000	Anthem, Inc.	
										Compcare Health Services Insurance				
0671	Anthem, Inc.		. 39-2013971				Meridian Resource Company, LLC	WI	NIA	Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35–1840597	-			National Government Services, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership		Anthem, Inc.	
0671	Anthem, Inc		. 46-1595582				National Telehealth Network, LLC	DE	NI A	Sellcore, Inc.	Ownership	50.000	Anthem, Inc	0105
0671	Anthem, Inc.		. 95-4249368				Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 95-4386221 .				Park Square I, Inc.	CA	NIA	WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 95-4249345				Park Square II, Inc.	CA	NIA	WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 65-0569629 .				PHP Holdings, Inc.	FL	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 43-1595640				R & P Realty, Inc.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		56-2396739				Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc		. 47-0851593				RightCHOICE Managed Care, Inc	DE	NIA	Anthem Holding Corp	Ownership		Anthem, Inc	
							Rocky Mountain Hospital and Medical							
0671	Anthem, Inc		. 84-0747736				Service, Inc.	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 20-0473316 .				SellCore, Inc.	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 27-0757414				Simply Healthcare Holdings, Inc.	FL	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 27-0945036 .				Simply Healthcare Plans, Inc.	FL	IA	Simply Healthcare Holdings, Inc	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 55-0712302 .				Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	
							State Sponsored Business UM Services, Inc							
0671	Anthem, Inc.		. 45-4071004					IN	NIA	UNICARE Specialty Services, Inc	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		. 35-1835818 .				The Anthem Companies, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership		Anthem, Inc.	
0671	Anthem, Inc.		45-5443372				The Anthem Companies of California, Inc	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		43-1967924				TrustSolutions, LLC	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	NIA	Government Health Services, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	12805	. 20-4842073 .				UNICARE Health Plan of Kansas, Inc.	KS	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
0074		44040	04 4000400				UNICARE Health Plan of West Virginia, Inc			INVIOLEDE N. I	0 1:	400,000		
0671	Anthem, Inc.	11810	. 84-1620480 .				INIOADE II III DI C.T.	WV	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95420	74-2151310				UNICARE Health Plans of Texas, Inc.	TX	IA	UNICARE Illinois Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		36-3899137				UNICARE Illinois Services, Inc.	IL	NIA	UNICARE National Services, Inc.	Ownership			
0671	Anthem, Inc.		. 52-0913817 95-4635507				UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership Ownership		Anthem, Inc.	
0671	Anthem, Inc.		95-4635507 77-0494551				UNICARE National Services, Inc.	DE	NIA	Anthem Holding Corp.				
	Anthem, Inc.		36-4014617				UNICARE Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership		Anthem, Inc.	
0671	Anthem, Inc.		20-4405193				UtiliMED IPA, Inc.	INY	NIA	American Imaging Management, Inc Anthem. Inc.	Ownership Ownership	100.000	Anthem, Inc.	
	Anthem, Inc.		20-4405193				WellPoint Acquisition, LLC	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		95-4640531				WellPoint Behavioral Health, Inc WellPoint California Services, Inc	DE	NIA NIA	Anthem Holding Corp.	Ownership	100.000		
0671	Anthem, Inc.		95-4657170				WellPoint Dental Services, Inc.	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-3620996				WellPoint Holding Corp	DE	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	
ו /סע	Antinelli, mc.		20-3020990 .				WellPoint Information Technology Services		NIA	ATTURENT, THE.	Owner Strip		Antinelli, Inc.	
0671	Anthem. Inc.		45-2736438				Inc.	,CA	NIA	Blue Cross of California	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		36-4595641				WelPoint Insurance Services. Inc.	CA   HI	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	
0671	Anthem, Inc.		47-2546820				WellPoint Military Care Corporation	HI	NIA	Government Health Services, LLC	Ownership		Anthem. Inc.	
0671	Anthem, Inc.		47-2546820 . 36-3897080 .				WellPoint Partnership Plan, LLC	IN	NIA NIA	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem, Inc.	
0671	Anthem, Inc.		36-3897080				WellPoint Partnership Plan, LLC	L	NIA	UNICARE IIIinois Services, Inc	Ownership	25.000	Anthem. Inc.	
0071	AITTHEIII, THE.		00-309/080 .				WPMI (Shanghai) Enterprise Service Co.		NIA	UNIONNE TITTHOTS SELVICES, INC	Owner 2016		TAITUICIII, IIIC.	
0671	Anthem. Inc.		98-0552141				Ltd.	CHN	NIA	WPMI. LLC	Ownership	100,000	Anthem. Inc.	
ו/טע	ATTUICII, THE.		JO−UUJ∠14   .	.			Llu	ו⊓עו	N I A	WFWI, LLV	OWING 2111D		JAHUHEIII, IIIC.	

# SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
											Туре	lf		
											of Control	Control		
											(Ownership,	is		
						Name of Securities			Relation-		Board,	Owner-		
						Exchange		Domi-	ship		Management,	ship		
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	*
0671	Anthem, Inc.		20-8672847 .				WPMI, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	63.880	Anthem, Inc.	0106

Asterisk	Explanation
0100 Insurer is deemed	to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health.
0101 Insurer is deemed	to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102 Insurer is deemed	to be an insurance affiliate in column 10, but does not have an NAIC Compnay Code in column 3 because it is regulated by the California Department of Managed Health Care.
0103 Insurer is deemed	to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0104 Insurer is deemed	to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0105 50% owned by unaffi	iliated investors
0106 30.09% owned by una	affiliated investors

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

			Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and to	he NAIC with this statement?	NO
	Explanation:		
1.			
1.	Bar Code:  Medicare Part D Coverage Supplement [Document Identifier 365]		

## **OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

			Current Statement Date			
		1	2	3		
				Net Admitted Assets	Prior Year Net	
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets	
2504.	Prepaid Expenses	284,614	284,614	0	0	
2505.	Miscellaneous Receivables	148,406	88	148,318	133,521	
2597.	Summary of remaining write-ins for Line 25 from overflow page	433,020	284,702	148,318	133,521	

Additional Write-ins for Liabilities Line 23

			Current Period			
		1	2	3	4	
		Covered	Uncovered	Total	Total	
2304.	Retroactivity Liability	1,240,204		1,240,204	597,444	
2305.	ACA Risk Adjustment Payable	617,989		617,989	0	
2306.	Performance Guarantee Liability	334,618		334,618	394,236	
2307.	Blue Card Liabilities	49,451		49,451	414,608	
2397.	Summary of remaining write-ins for Line 23 from overflow page	2,242,262	0	2,242,262	1,406,288	

## **SCHEDULE A - VERIFICATION**

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	8,573,920	8,055,018
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	1,092,170	921,594
	2.2 Additional investment made after acquisition		0
3.	Current year change in encumbrances		0
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		0
7.	Deduct current year's other than temporary impairment recognized		0
8.	Deduct current year's depreciation	227,040	402,692
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	9,439,050	8,573,920
10.	Deduct total nonadmitted amounts		0
11.	Statement value at end of current period (Line 9 minus Line 10)	9,439,050	8,573,920

## **SCHEDULE B - VERIFICATION**

Mortgage Loans

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest polymand ammitment lessess		
9.	Total foreign exchange change in book value/recorded investment excrete accrued interest		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

## **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	Other Long-Term Invested Assets		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	162,097	205,702
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)	(10,001)	(43,605)
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	152,096	162,097
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	152,096	162,097

## **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	200,748,393	195,960,781
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount	54,863	
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	52,772	489,680
6.	Deduct consideration for bonds and stocks disposed of	18,269,010	53,363,059
7.	Deduct amortization of premium		2,008,532
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	205,745,304	200,748,393

## **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

During	the Current Quarter for		erred Stock by NAIC	Designation				
NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	135,838,295	15,638,901	12,823,014	(2,080,012)	135,838,295	136,574,170	0	129,627,112
2. NAIC 2 (a)	69,343,186	3,237,448	4,153,915	1,664,520	69,343,186	70,091,239	0	72,832,317
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	205, 181, 481	18,876,349	16,976,929	(415,492)	205, 181, 481	206,665,409	0	202,459,429
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	205, 181, 481	18,876,349	16,976,929	(415,492)	205, 181, 481	206,665,409	0	202,459,429

a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$; NAIC 3 \$
---

NAIC 4 \$ ......; NAIC 5 \$......; NAIC 6 \$.....

## **SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals	920,105	XXX	920,105	9	0

## **SCHEDULE DA - VERIFICATION**

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	1,711,036	1,853,733
2.	Cost of short-term investments acquired	15,702,345	16, 152, 756
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	16,493,276	16,295,453
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	920,105	1,711,036
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	920,105	1,711,036

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts  $N\ O\ N\ E$ 

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

Schedule E - Verification - Cash Equivalents  $N\ O\ N\ E$ 

## **SCHEDULE A - PART 2**

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

		<u> </u>		re in the hand the carrent quarter				
1			4	5	6	7	8	9
	Location							
	2	3						Additional
							Book/Adjusted	Investment
			Date		Actual Cost at	Amount of	Book/Adjusted Carrying Value	Made After
Description of Property	City	State	Acquired	Name of Vendor	Time of Acquisition	Encumbrances	Less Encumbrances	Acquisition
	South Portland	NE.	04/01/2015 Various	Traine of Fortage	13,884		13,652	7.1040.01.011
	South Portland	WE	04/01/2015		6,626		6.552	
	South Portland	ME					901,313	
Z Gannett Drive	South Portrand	ME	Various		, , , , , , , , , , , , , , , , , , , ,			
0199999. Acquired by Purchase					926,857	0	921,517	0
							T	
							<u> </u>	
		······						
0399999 - Totals					926,857	0	921,517	0

## **SCHEDULE A - PART 3**

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

Onowing Air Tear Estate Dior Ocea Barring the Quarter, moraling to America Barring the Final Tear on Ocice Ontains																			
1	Location	on	4	5	6	7	8	Change in	Book/Adjusted	d Carrying Va	alue Less En	cumbrances	14	15	16	17	18	19	20
	2	3				Expended		9	10	11	12	13							
						for	Book/					Total	Book/					Gross	
						Additions,	Adjusted				Total	Foreign	Adjusted					Income	
						Permanent	Carrying		Current		Change in	Exchange	Carrying		Foreign			Earned	
						Improve-	Value Less		Year's	Current	Book/	Change in	Value Less		Exchange	Realized	Total	Less	Taxes,
						ments and	Encum-	Current	Other Than	Year's	Adjusted	Book/	Encum-	Amounts	Gain	Gain	Gain	Interest	Repairs
						Changes	brances	Year's	Temporary	Change in	Carrying	Adjusted	brances	Received	(Loss)	(Loss)	(Loss)	Incurred on	and
			Disposal		Actual	in Encum-	Prior	Depre-	Impairment	Encum-	Value	Carrying	on	During	on	on	on	Encum-	Expenses
Description of Property	City	State	Date	Name of Purchaser	_Cost	brances	Year	ciation	Recognized	hrances	(11-9-10)	Value	Disposal	Year	Disposal	Disposal	Disposal	brances	Incurred
			<u></u>																<del> </del>
			<del>-</del>																
										<del></del>									
						7													
																			<b></b>
			<b>.</b>			-													<del> </del>
						+													t
0300000 - Totals		***************************************	•																

# Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made $N\ O\ N\ E$

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid  $N\ O\ N\ E$ 

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made  ${\sf N} \; {\sf O} \; {\sf N} \; {\sf E}$ 

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid  $N\ O\ N\ E$ 

# **SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2 3	1 4	Long-Term bonds and Stock Acquired buring the outlent Quarte	6	7	8	Ω	10
'	2	-	J	0	,	0	9	NAIC Desig-
							5	nation or
		_		Number of			Paid for Accrued	Market
CUSIP		Date		Shares of			Interest and	Indicator
	escription Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	(a)
001055-AL-6 AFLAC INC 3.625% 06/15/23			First Union Capital Markets		715,393	700,000		1FE
		05/01/2015	RBC Dominion		727 , 118	700,000	11, 157	
	3		Stifel Nicolaus & Co		730,828	700,000	5,289	
			Bank of America		982,530	1,000,000	5,208	
			US Bancorp		729,099	700,000	11, 156	
			J P Morgan		693 , 189	700,000		1FE
			Jeffries & Co		723,282	700,000		1FE
			Citigroup Global Markets		727 , 706	700,000	4,667	
			RBC Dominion		739 , 165	700,000	14,919	
			Bear Stearns		700,511	700,000	708	1FE
724479-AJ-9 PITNEY BOWES INC 4.625% 03/15/24			Morgan Stanley			700,000	4,586	2FE
747525-AF-0 QUALCOMM INC 3.450% 05/20/25			Jeffries & Co		683,319	700,000		1FE
811065-AF-8 SCRIPPS NETWORKS INTERACTIVE 3.500% 06/1	15/22		RBC Dominion		687,603	700,000	1,633	2FE
863667-AF-8 STRYKER CORP 3.375% 05/15/24			Baird & Co			700,000	1,706	1FE
90131H-AQ-8 21ST CENTURY FOX AMERICA 4.500% 02/15/21		04/06/2015	Tax Free Exchange		1,087,587	1,000,000	6,375	
3899999. Subtotal - Bonds - Industrial and Miscel	llaneous (Unaffiliated)				11,347,847	11,100,000	81,619	
8399997. Total - Bonds - Part 3					11,347,847	11,100,000	81,619	
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds					11,347,847	11,100,000	81,619	
8999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks					0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3					0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total - Common Stocks	0	XXX	0	XXX				
9899999. Total - Preferred and Common Stocks					0	XXX	0	XXX
9999999 - Totals		•			11,347,847	XXX	81,619	XXX

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

## **SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

	Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter																			
1	2	3 4	5	6	7	8	9	10	CI	nange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
									11	12	13	14	15							
												Total	Total							NAIC
											Current	Change in	Foreign							Desig-
											Year's	Book/	Exchange	Book/				Bond		nation
								Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Interest/	Stated	or
								Book/	Unrealized	Year's	Temporary	- ,	Book	Carrying	Exchange	Realized		Stock	Con-	Market
CUSIP				Number of				Adjusted	Valuation	(Amor-	Impairment	, 3	/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	In-
Ident-		For- Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	
ification	Description	eign Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal		DuringYear	Date	(a)
	AFLAC INC 8,500% 05/15/19	04/11/2015		Otock	1.271.240	1.000.000	1,317,230	1,207,358	(Decrease)	(12, 290)	n n	(12,290)		1.195.068	Лорозаг	76.172	76.172	34,472	05/15/2019	(/
30 1000 AO 0	AI EAG 1140 0.300/i 03/ 13/ 13		MarketAxess Corporation			1,000,000				(12,250)		(12,230)		1, 100,000						
018490-AM-4	ALLERGAN INC 5.750% 04/01/16				1,036,940	1,000,000	1,162,250	1,054,840	0	(21, 227)	0	(21,227)	0	1,033,613	0	3,327	3,327	42,326	_04/01/2016 _	1FE
			First Tennessee Capital																	
	HOME DEPOT INC 5.400% 03/01/16				1,038,800	1,000,000	1, 133,530	1,053,133	0	(17,660)	0	(17,660)	0	1,035,474	0	3,326	3,326		03/01/2016 .	
652482-CB-4	NEWS AMERICA INC 4.500% 02/15/21		. Tax Free Exchange		1,087,587	1,000,000	1,121,120	1,091,201	0	(3,614)	0	(3,614)	0	1,087,587	0	0	0	28,875	02/15/2021 .	. 2FE
744320-BR-5	PRUDENTIAL FINANCIAL INC MTN 3.000%	00 (40 (0045	RBC Dominion		1.018.400	1.000.000	4 000 000	4 044 550		(0.004)		(0.004)		1.007.729		40.074	10.671	47 750	05 (40 (0040	055
	CHARLES SCHWAB CORP 0.850% 12/04/15		Baird & Co		1,018,400	1,000,000	1,032,690 1,005,530	1,011,550 1.001,906	ļ	(3,821)		(3,821)	0	1,007,729		1.443	1.443		05/12/2016 . 12/04/2015 .	
	THERMO FISHER SCIENTIFIC 3.200% 05/01/15				1,000,000	1,000,000	1,003,530	1,001,906	٥	(325)	0	(325)	0	1,000,000		1,443	1,443		05/01/2015 .	
	TIME WARNER INC 5.875% 11/15/16		Corporate Action		1,073,500	1,000,000	1,176,630	1,075,523	0	(16,923)	0	(16,923)	0	1.058.598	0	14.902	14,902	32.476	. 11/15/2016	
	BNP PARIBAS SERIES MTN 2.450% 03/17/19		UBS Securities Inc		1,008,510	1,000,000	998,420	998,653	0	145	0	145	0	998,798	0	9,712	9,712	18,715	_03/17/2019	
3899999.	Subtotal - Bonds - Industrial and Misce	ellaneous (Unaffil	iated)		9,537,537	9,000,000	9,951,943	9,494,489	0	(76,503)	0	(76,503)	0	9,417,984	0	119,553	119,553	233,510	XXX	XXX
8399997.	Total - Bonds - Part 4	•			9,537,537	9,000,000	9,951,943	9,494,489	0	(76,503)	0	(76,503)	0	9,417,984	0	119,553	119,553	233,510	XXX	XXX
8399998.	Fotal - Bonds - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999.	Fotal - Bonds				9,537,537	9,000,000	9,951,943	9,494,489	0	(76,503)	0	(76,503)	0	9,417,984	0	119,553	119,553	233,510	XXX	XXX
8999997.	Fotal - Preferred Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998.	Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999.	Total - Preferred Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997.	Total - Common Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998.	Total - Common Stocks - Part 5	•			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999.	Total - Common Stocks	•			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999.	Total - Preferred and Common Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 -	Totals	·			9,537,537	XXX	9,951,943	9,494,489	0	(76,503)	0	(76,503)	0	9,417,984	0	119,553	119,553	233,510	XXX	XXX

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues......

# Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

# Schedule DB - Part B - Section 1 - Futures Contracts Open $\overline{N}$ $\overline{O}$ $\overline{N}$ $\overline{E}$

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made  $\overline{\mathsf{N}}$   $\overline{\mathsf{O}}$   $\overline{\mathsf{N}}$   $\overline{\mathsf{E}}$ 

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To  $\overline{N}$   $\overline{O}$   $\overline{N}$   $\overline{E}$ 

# SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
			NAIC			
CUSIP			Designation/		Book/Adjusted	
Identification	Description	Code	Market Indicator	Fair Value	Carrying Value	Maturity Date
0599999. Total	- U.S. Government Bonds			0	0	XXX
1099999. Total	- All Other Government Bonds			0	0	XXX
1799999. Total	- U.S. States, Territories and Possessions Bonds			0	0	XXX
2499999. Total	- U.S. Political Subdivisions Bonds			0	0	XXX
3199999. Total	- U.S. Special Revenues Bonds			0	0	XXX
000000-00-0	CITIGROUP GLOBAL MARKETS		2	1,451,770	1,451,770	08/03/2015
000000-00-0	GUGGENHEIM SECURITIES		11	871,062		07/01/2015
000000-00-0	BNP PARIBAS SECS CORP		11			08/10/2015
000000-00-0	BARCLAYS CAPITAL INC			2,903,539	2,903,539	07/01/2015
000000-00-0	CANTOR FITZGERALD & CO		1	316,204	316,204	07/01/2015
000000-00-0	BNP PARIBAS SECS CORP			116, 142	116, 142	07/01/2015
000000-00-0	CITIGROUP GLOBAL MARKETS		1		578,365	07/01/2015
	BNP PARIBAS SECS CORP		1	871,062	871,062	08/07/2015
000000-00-0	JEFFERIES LLC		2		871,062	07/01/2015
3299999. Subto	otal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obliga	ations		8,269,560	8,269,560	XXX
3899999. Total	- Industrial and Miscellaneous (Unaffiliated) Bonds			8,269,560	8,269,560	XXX
4899999. Total	- Hybrid Securities			0	0	XXX
5599999. Total	- Parent, Subsidiaries and Affiliates Bonds			0	0	XXX
	- Issuer Obligations			8,269,560	8,269,560	XXX
6299999. Total	- Residential Mortgage-Backed Securities			0	0	XXX
6399999. Total	- Commercial Mortgage-Backed Securities			0	0	XXX
6499999. Total	- Other Loan-Backed and Structured Securities			0	0	XXX
6599999. Total	Bonds			8,269,560	8,269,560	XXX
7099999. Total	- Preferred Stocks			0	0	XXX
000000-00-0	BNP PARIBAS PRIME BROKE		L		871,062	
7199999. Subto	otal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)			871,062	871,062	XXX
7599999. Total	- Common Stocks			871,062	871,062	XXX
7699999. Total	- Preferred and Common Stocks			871,062	871,062	XXX
9999999 - Tota	ls			9,140,622	9,140,622	XXX

General Interrogatories:

1.	Total activity for the year to date	Fair Value \$1,523,337	Book/Adjusted Carrying Value \$
2.	Average balance for the year to date	Fair Value \$10,303,534	Book/Adjusted Carrying Value \$10,303,534

# **SCHEDULE DL - PART 2** SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date

	Reinvested Collateral Asset		u Currelli State	Illelit Date		1
1	2	3	4	5	6	7
			NAIC			
CUSIP			Designation/		Book/Adjusted	
	Description	Codo		Fair Value	Corning Value	Moturity Data
Identification	Description	Code	Market Indicator	Fair Value	Carrying Value	Maturity Date
				<b>.</b>		
				1		
			·······	T		
		7	······· <b>T</b>			
		·····				
			· · · · · · · · · · · · · · · · · · ·			
			•			
9999999 - Tota	ls			1		l xxx

General	Interrogatories:
---------	------------------

Total activity for the year to date
 Average balance for the year to date

Fair Value \$	Book/Adjusted Carrying Value \$	
Fair Value \$	Book/Adjusted Carrying Value \$	

## **SCHEDULE E - PART 1 - CASH**

		Month	<b>End Depository</b>	Balances				
1	2	3	4	5		lance at End of Eac uring Current Quart		9
		Rate of	Amount of Interest Received During Current	Amount of Interest Accrued at Current	6	7	8	
Depository		Interest	Quarter	Statement Date	First Month		Third Month	*
Bank of America Hartford, CT					(25,871,849)	(23, 149, 566)	(35,922,288)	XXX
Citibank New Castle, DE					2,608,463	43,237	110,466	XXX
Bank of New York Mellon New York, NY					(190,894)	(149,074)	(344,874)	.XXX.
0199998. Deposits in 1 depositories that do not exceed the allowable limit in any one depository (See					(22.554)	_		
instructions) - Open Depositories	XXX	XXX			(22,551)	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	(23,476,831)	(23, 255, 403)	(36, 156, 696)	XXX
0299998. Deposits in depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX			0	0	0	xxx
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	(23,476,831)	(23,255,403)	(36, 156, 696)	
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX

0599999. Total - Cash

(23,476,831)

# Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter $N\ O\ N\ E$